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DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is

METHOD OF ENHANCING PROTEIN ABSORPTION AND UTILIZATION

	the specification of wh	nich	••			
10	(check one)	is attached h	ereto.			
	·	was filed on		as		
		Application	Serial No.	,		
	and was amended on					
	(if applicable)					
15	I hereby state	that I have review	ved and understand the conter	nts of the above		
	identified specification, including the claims, as amended by any amendment referred to					
	above.			·		
	I acknowledg	e the duty to dis	close information which is	material to the		
	examination of this application in accordance with Title 37, Code of Federal Regulations					
20	§1,56(a).					
	I hereby claim foreign priority benefits under Title 35, United States Code, §119					
	of any foreign application(s) for patent or inventor's certificate listed below and have also					
	identified below any foreign application for patent or inventor's certificate having a filing					
	date before that of the	application on whic	h priority is claimed: N/A.	• •		
25	Prior Foreign Application(s):		Prior	ity Claimed		
	(Number)	(Country)	(Day/Month/Year Filed) Ye	s No		
	(Number)	(Country)	(Day/Month/Year Filed) Year	es No		

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I hereby claim the benefit under Title 35, United States Code §119(e) of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a).which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

60/123,424	March 9, 1999	<u>Provisional</u>	
(Serial No.)	(Filing Date)	(Status)	
09/517,502	March 2, 2000	Pending	
(Serial No.)	(Filing Date)	(Status)	

I do hereby appoint Paul M. Denk, Patent Office registration No. 22,598, with offices at 763 South New Ballas Road, St. Louis, Missouri 63141, Tel. No. (314) 872-8136, as my attorney and agent with full power of substitution and revocation, to prosecute the application above set forth, and to transact all business in the United States Patent and Trademark Office in connection therewith.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole inventor:

Inventor's signature:

Date:

Residence:

County of San Bernardino
State of California

Citizenship:

Post Office Address:

U.S.A.

412 Cedar Ridge Drive
P.O. Bos 1532

Lake Arrowhead, California 92352

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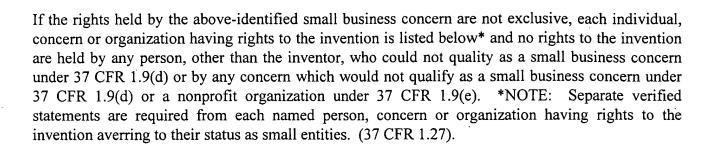
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Applicant or Patentee: Phil ip Connolly	Attorney's
Serial or Patent No .:	Docket
Filed or Issued:	No. <u>7000</u>
For: METHOD OF ENHANCING PROTEIN ABSORPTION AND UT	<u>ILIZATION</u>
VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENT (37 CFR 1.9(f) and 1.27(c) - SMALL BUSINESS CONCERN	TITY STATUS
I hereby declare that I am	
 () the owner of the small business concern identified below: (X) an official of the small business concern empowered to act on 	behalf of the concern
identified below.	
NAME OF CONCERN: Commercial Proteins Corporation	
ADDRESS OF CONCERN: 412 Cedar Ridge Drive, P.O. Box 1532	
Lake Arrowhead, California 92352	
I hereby declare that the above identified small business concern quaconcern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.90 reduced fees under Section 41(a) and (b) of Title 35, United States Comployees of the concern, including those of its affiliates, does not a purposes of this statement, (1) the number of employees of the business of the previous fiscal year of the concern of the persons employed on temporary basis during each of the pay periods of the fiscal year, and (2) each other when either, directly or indirectly, one concern controls or has other, or a third party or parties controls or has the power to control both.	d), for purposes of paying ode, in that the number of exceed 500 persons. For concern is the average over a full-time, part-time or) concerns are affiliates of
I hereby declare that rights under contract or law have been conveyed to business concern identified above with regard to the invention enverted to the invention of ENHANCING PROTEIN ABSORPTION AND UTILIZATION by inventor(s) Phil ip Connolly	
described in:	
(X) the specification filed herewith	
() the application Serial No.	
() Patent No. , issued	·



NAME
ADDRESS
() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION
NAME
ADDRESS (
() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.
NAME OF PERSON SIGNING Phil ip Connolly
TITLE OF PERSON OTHER THAN OWNER President
ADDRESS OF PERSON SIGNING 412 Cedar Ridge Drive, P.O. Box 1532
Lake Arrowhead, California 92352
SIGNATURE / DATE 12-27-01
Phillip Connolly President